



ATTORNEY DOCKET NO. P3958

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated be low next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Method and Apparatus for Obtaining and Aggregating Off-line User Data for Re-packaging and Presentation to Users over a Data-Packet-Network

the specification of which (check on	e) is attached hereto) .			
	was filed on:			,	
	Application Serial	1 No 09/75	57 553		
	and was amended		7,555		
	(If applicable)			•	
I have by state that I have reviewed a			shave identified	anasification including the	
I hereby state that I have reviewed and understood the contents of the above-identified specification, including the					
claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is					
material to the examination of this application in accordance with Title 37, Code of Federal Regulations, s 1.56 (a). In					
the case that the present application is a continuation-in-part application, I further acknowledge the duty to disclose					
material information as defined in 37					
application and the filing date of the					
States Code s119 of any foreign app	lications for patent or in	nventor's c	ertificate listed be	low and have also identified	
below any foreign application for pa	tent or inventor's certif	icate havin	g a filing date bef	ore	
that of the application on which prior	rity is claimed:		•		
Prior Foreign Application(s)	•				
	(Number))	(Country)	(Day/Month/Year Filed)	
	,	•	`	,	
	(Number))	(Country)	(Day/Month/Year Filed)	
I hereby claim the benefit under Titl					
below and, insofar as the subject ma					
States application in the manner prov					
the duty to disclose material informa					
between the filing date of the prior a	ppiication and the natio	onal or PC.	i international iii	ng date of this application.	
				,	
(Application Serial No.): <u>09/323.5</u>	98 (Filing Date): <u>06/0</u>	<u>1/1999</u> (S	status): <u>pending</u>		
(Application Serial No.): 09/208,7	<u>40</u> (Filing Date): <u>12/0</u>	<u>8/1998</u> (S	Status): <u>pending</u>		
(Application Serial No.): (Filing Date): (S	Status):			
(Application Serial No.): (Filing Date): (S	Status):			
(Application Serial No.): (Filing Date): (S	Status):			
POWER OF ATTORNEY: As a nar	med inventor, I hereby	appoint the	e following attorn	ey(s) and/or agent(s) to	
prosecute this application and transa					
(List name and registration number)					
Name:Donald R. Boys	Reg. No. 35,074		•		

SEND CORRESPONDENCE TO: Donald R. Boys P.O. Box 187 Aromas, CA 95004 DIRECT TELEPHONE CALLS TO: Donald R. Boys (831) 726-1457



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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor: Sukhinder Singh	,
1st inventor's signature:	Dated:
Residence: 1801 - 15th St., #3 San Francisco CA. 94013 Citizenship: Canadian	— Buildi. 4/11 /
Post Office Address: Same	
1 0st Office / teatioss. <u>Statio</u>	
Full name of 2nd joint inventor, if any: Sreeranga Prasannakumar Rajan	Dated: _l/l0/0
	thinh.
2nd inventor's signature:	Dated: <u>\(\lambda \) \(\lambda \) \(\lambda \) \(\lambda \)</u>
Residence: 3475 Granada Avenue #320, Santa Clara, CA 95051 Citizenship: US	• •
Post Office Address: Same	
Full name of 3rd joint inventor, if any:	
3rd inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 4th joint inventor, if any:	
4th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 5th joint inventor. if any:	
5th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 6th joint inventor. if any:	
Cab incompanie alemanare	Dated:
6th inventor's signature:	Dated
Post Office Address:	
1 031 Office Address.	
Full name of 7th joint inventor. if any:	•
7th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	
Full name of 8th joint inventor. if any:	
8th inventor's signature:	Dated:
Residence: Citizenship:	
Post Office Address:	

Declaration and Power of Attorney- Page 2